

## **Fee Assistance Application**

FOR OFFICE USE ONLY:						
MI-ME:						
■ Approved	■ Denied	Date:				
■ Letter Sent	Date:					
Staff Initials: _						

Name (Main Contact Person): First_			T.	ast		
Address:						
Home Phone:						
Email address:						
Name of each member of household	Birthdate	Grade in Fall/2017	Male/ Female	Relationsh	ip to Ma	in Contact Per
1. (Main Contact Person)						
2.						
3.						
4.						
5.						
6.						
If additional space is needed,  My child participates in a Free or I  If yes, provide a copy of the of If no, continue to step 3 and	Reduced Pr	riced Lunc	h Progra he school	m at school		YES
My child participates in a Free or I If yes, provide a copy of the If no, continue to step 3 and	Reduced Pr	riced Lunc	h Progra he school	m at school		YES
My child participates in a Free or I	Reduced Preligibility less provide co	riced Lunc etter from t pies of doc	h Progra he school uments.	m at school		
My child participates in a Free or I  If yes, provide a copy of the of Ino, continue to step 3 and INCOME INFORMATION (Needed ONLY if child does NOT	Reduced Preligibility less provide co	riced Lunc etter from t pies of doc	h Progra the school uments.	am at school	step 4.	
My child participates in a Free or I  If yes, provide a copy of the o  If no, continue to step 3 and  INCOME  INFORMATION  (Needed ONLY if child does NOT Receive Free or Reduced Lunches)	Reduced Preligibility le provide co	riced Luncetter from to pies of docu	h Progra the school uments. e (Before taxe	am at school	step 4.	
My child participates in a Free or I  If yes, provide a copy of the of Ino, continue to step 3 and INCOME INFORMATION (Needed ONLY if child does NOT Receive Free or Reduced Lunches) To demonstrate financial need, provide	Reduced Preligibility le provide co	riced Luncetter from to pies of documents of documents of documents of the piece of	h Progra the school uments. e (Before taxe	am at school	step 4.	
My child participates in a Free or I  If yes, provide a copy of the of Ino, continue to step 3 and INCOME INFORMATION (Needed ONLY if child does NOT Receive Free or Reduced Lunches)  To demonstrate financial need, provide copy of your federal tax return for the previous year and copies of the most	Earned Mon	riced Luncetter from to pies of documents of documents of documents of the piece of	the school uments.  The (Before taxe) unty Support	am at school	step 4.  s s	
My child participates in a Free or I  If yes, provide a copy of the of Ino, continue to step 3 and  INCOME INFORMATION (Needed ONLY if child does NOT Receive Free or Reduced Lunches)  To demonstrate financial need, provide copy of your federal tax return for the previous year and copies of the most recent two months of income for your household.	Earned Months and Spouse and Social Section 1	riced Lunc etter from t pies of docu ONTHLY Incom state, and/or Cou d Child Support	the school uments.  The (Before taxe unty Support	am at school	\$ \$ \$ \$ \$ \$	
My child participates in a Free or In If yes, provide a copy of the of If no, continue to step 3 and INCOME INFORMATION (Needed ONLY if child does NOT Receive Free or Reduced Lunches)  To demonstrate financial need, provide copy of your federal tax return for the previous year and copies of the most recent two months of income for your	Earned Months and Spouse and Social Section Pensions, and	riced Lunce etter from to pies of docu  ONTHLY Income itate, and/or Cou d Child Support urity/SSI Dividends, & Est	the school uments.  The (Before taxe) unty Support atte or Trust	am at school and skip to	\$ \$ \$ \$ \$ \$ \$ \$	
My child participates in a Free or I  If yes, provide a copy of the of If no, continue to step 3 and  INCOME INFORMATION (Needed ONLY if child does NOT Receive Free or Reduced Lunches)  To demonstrate financial need, provide copy of your federal tax return for the previous year and copies of the most recent two months of income for your household.  Income is based on gross pay.	Earned Mo Federal, S Spouse and Social Sector Interest, D Pensions, Disability	riced Lunce etter from to pies of docu  ONTHLY Income state, and/or Cou d Child Support urity/SSI Dividends, & Est. Annuities & PE. or Workman's Co	the School uments.  The (Before taxe) unty Support atte or Trust  RA  Compensation	am at school and skip to	step 4.  s  s  s  s  s  s  s	
My child participates in a Free or I  If yes, provide a copy of the of Ino, continue to step 3 and  INCOME INFORMATION (Needed ONLY if child does NOT Receive Free or Reduced Lunches)  To demonstrate financial need, provide copy of your federal tax return for the previous year and copies of the most recent two months of income for your household.	Earned Mo  Federal, S  Spouse and Social Sector  Interest, D  Pensions, D  Disability  Unemploy	riced Lunce etter from topies of docu  ONTHLY Income state, and/or Cond Child Support  urity/SSI  Dividends, & Est.  Annuities & PE.  or Workman's Comment Compensa	the school uments.  The (Before taxe)  The (Before taxe)  The area or Trust  The area or	am at school and skip to	step 4.  s s s s s s s s s	
My child participates in a Free or I  If yes, provide a copy of the of Ino, continue to step 3 and INCOME INFORMATION (Needed ONLY if child does NOT Receive Free or Reduced Lunches)  To demonstrate financial need, provide copy of your federal tax return for the previous year and copies of the most recent two months of income for your household.  Income is based on gross pay.	Earned Mo  Federal, S  Spouse and Social Sec  Interest, D  Pensions, Disability  Whemploy  All other in	riced Lunce etter from to pies of docu  ONTHLY Income state, and/or Cou d Child Support urity/SSI Dividends, & Est. Annuities & PE. or Workman's Co	the School aments.  The (Before taxe)  The (Before taxe)  The area of Trust  The area of	and skip to	step 4.  s  s  s  s  s  s  s	